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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
· Your full name	Diane	
	First name	First name
Write the name that is on		
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Turner	
license or passport	Last name	Last name
Bring your picture		
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
meeting with the trustee.		
All other names you	First is an a	Find your
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or	Middle name	Middle Hairle
maiden names.	Last name	Last name
	Last Harro	Last Harris
	First name	First name
	Middle name	Middle name
	Last name	Last name
. Only the last 4 digits		
of your Social	XXX - XX- 1795	XXX - XX-
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number		
(ITIN)		

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D	ebtor 1 Diane First Name	Turner  Middle Name Last Name	Case number (if known)
	i ii st ivaine	Wildele Warie Last Warie	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		11242 S Indiana Ave Apt 2 Number Street	Number Street
		Chicago Illinois 60628	
		City State Zip Code Cook	City State Zip Code
		County	County
		•	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to
		notices to you at this mailing address.	this mailing address.
		,	
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Diane		Turner	_ Case number (if kn	own)
	First Name	Middle Name	Last Name		
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy Ca	ase		
7.	The chapter of the Bankruptcy Code you are choosing to file under		description of each, see <i>Notice R</i> 0)). Also, go to the top of page 1 a		C. § 342(b) for Individuals Filing for opriate box.
8.	How you will pay the fee	more details about cashier's check, or may pay with a cred  I need to pay the findividuals to Pay  I request that my finding may, but is not the official poverty you choose this open.	how you may pay. Typically, if money order. If your attorney i dit card or check with a pre-pri fee in installments. If you choo Your Filing Fee in Installments fee be waived (You may reque not required to, waive your fee, I line that applies to your family	you are paying the submitting your nted address.  see this option, signormal form 103 st this option only and may do so on size and you are	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> BA).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	Yes. District  District  District	Wh	MM / DD / YYYY en MM / DD / YYYY	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	V No.  Yes. Debtor District Debtor District	Wh	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	✓ No. Go to	ord obtained an eviction judgmen o line 12. ut <i>Initial Statement About an Evict</i> oankruptcy petition.		st You (Form 101A) and file it with

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Diane Turner Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Diane Turner Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Diane Turner Signature of Debtor 1 Signature of Debtor 2 Executed on \_\_5/29/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Diane		Turner	Case number (if i	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed une	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an				ules filed with the petition is incorrect.
attorney, you do not	_	. 4. 7		
need to file this page.	/s/ Alexander Prebe	r	Date	5/29/2018
	Signature of Attorney			M / DD / YYYY
	o.ga.a.o o. /oo,			
	Alexander Preber			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3122374979	Email address	apreber@semradlaw.com
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Diane		Turner	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number				
(If known)				

Check if this is ar	1
amended filing	

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$4,277.50
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$4,277.50
art 2: Summarize Your Liabilities	
	<b>Your liabilities</b> Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	<b>#10.740.00</b>
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$10,746.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$22,185.00
Your total liabilities	\$32,931.00
art 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I)	\$3,768.70
Copy your combined monthly income from line 12 of Schedule I	

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Debt	or 1 Diane		Turner	Case number (if known)	
D	First Name	Middle Name	Last Name	a a u da	
Part 4	Answer These Que	Suons for Administrat	ive and Statistical Rec	ords	
6. <b>A</b> ı	e you filing for bankruptcy	under Chapters 7, 11, o	r 13?		
	No. You have nothing to	report on this part of the fo	rm. Check this box and sub	omit this form to the court with your other sch	edules.
<u> </u>	Yes.				
7 W	— hat kind of debt do you ha	we2			
	-				
Ŀ				d by an individual primarily for a personal, cal purposes. 28 U.S.C. § 159.	
Г	Your debts are not prim	arily consumer debts. Yo	ou have nothing to report on	n this part of the form. Check this box and sub	omit
	this form to the court with	your other schedules.	·		
8. <b>F</b>	rom the Statement of You	r Current Monthly Incom	e: Copy your total current m	nonthly income from Official	\$2,582.11
F	Form 122A-1 Line 11; <b>OR</b> , Fo	orm 122B Line 11; <b>OR</b> , Fo	orm 122C-1 Line 14.		
9.	Copy the following special	categories of claims fro	om Part 4. line 6 of Schedu	ule E/F:	
•	cop, me teneming special				
	From Part 4 on Schedule I	E/F, copy the following:		Total claim	
	9a. Domestic support obliga	itions (Copy line 6a.)		\$0.00	
	Ob Tayon and partain ather	dabta vay awa tha gayara	ment (Conviling Ch.)	\$0.00	
	9b. Taxes and certain other	debts you owe the governi	ment. (Copy line 6b.)		
	9c. Claims for death or person	onal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy lin	e 6f.)		\$0.00	
	9e. Obligations arising out o		or divorce that you did not re	eport as \$0.00	
	priority claims. (Copy line 6g	.)			
	9f. Debts to pension or profi	it-sharing plans, and other	similar debts. (Copy line 6h.	.) \$0.00	

\$0.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	inform	ation to identify your ca	ase:					
Debtor 1		Diane			Turner			
Debtor 2		First Name	Middle N	ame	Last Name			
(Spouse, if fi	ling)	First Name	Middle N	ame	Last Name			
United Sta	ates Bai	nkruptcy Court for the:	Northern		District of Illinois			
Case num	nber				(State)			
Officia	al Fo	rm 106A/B						Check if this is an amended filing
Sche	dule	A/B: Prope	rty					12/1
category v responsibl write your	where y le for s name	you think it fits best. E upplying correct infor and case number (if k	se as complete ar mation. If more sp nown). Answer ev	nd acc pace i very qu	asset only once. If an asset fits in curate as possible. If two married s needed, attach a separate shee uestion. Other Real Estate You Own o	people a t to this f	re filing together, both a form. On the top of any a	are equally
1. Do you			uitable interest i	n any	residence, building, land, or simil	ar propei	ty?	
<u> </u>		o to Part 2						
1.1		Where is the property?  address, if available, or or	other description		t is the property? Check all that app Single-family home Duplex or multi-unit building	oly.	the amount of any secu	claims or exemptions. Put used claims on Schedule D: nims Secured by Property.
					Condominium or cooperative  Manufactured or mobile home		Current value of the entire property?	Current value of the portion you own?
	Numb	er Street State	Zip Code	Ħ,	and nvestment property imeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
				one.	has an interest in the property? ( Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only at least one of the debtors and anoth		Check if this is co (see instructions)	ommunity property
					er information you wish to add abo	ut this it	em, such as local	
If you	own o	r have more than one, lis	st here	prop	erty identification number:			
1.2		address, if available, or o			t is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	oly.	the amount of any secu	claims or exemptions. Put tred claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the portion you own?
	Numb	er Street	Zip Code	Ħ,	and nvestment property imeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
			, -	one.	has an interest in the property? ( Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about the debtors and anothers.	er	(see instructions)	ommunity property

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Debtor 1	Diane		Turner	Case numbe	r (if known)	
	First Name	Middle Name	Last Name			
1.3 Stre	et address, if available, or oth		Vhat is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [ ]	//ho has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar	nother	(see instructions)	mmunity property
	the dollar value of the por ve attached for Part 1. Wri	•	III of your entries from Part 1, inclere.	uding any entrie	s for pages	
<b>Do you ow</b> you own t	hat someone else drives. If your strucks, tractors, sport util	equitable interest ou lease a vehicle, a	in any vehicles, whether they are also report it on Schedule G: Executo cycles	-	-	
3.1	Make Model: Year:	Nissan Versa 2013	Who has an interest in the proone.  Debtor 1 only	pperty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:	100000	Debtor 2 only Debtor 1 and Debtor 2 only  At least one of the debtors at		Current value of the entire property? \$2725.00	Current value of the portion you own? \$1362.50
3.2	Make Model: Year:		instructions)  Who has an interest in the proone.  Debtor 1 only	pperty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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	Diane First Name	Middle Name	Turner Last Name	Case number	el (ITKNOWN)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions)	nly rs and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Laims Secured by Property.  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on		the amount of any secu	claims or exemptions. Pured claims on Schedule Laims Secured by Property.  Current value of the portion you own?
			At least one of the debtor  Check if this is commu instructions)			
		•	er recreational vehicles, other , fishing vessels, snowmobiles,	•		
Exa	mples: Boats, trailers, motors No Yes	•		motorcycle accessori property? Check  hly rs and another	Do not deduct secured the amount of any secu	claims or exemptions. Pu ired claims on <i>Schedule L</i> aims Secured by Property. Current value of the portion you own?

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Household Goods \$1000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Used mobile, tv, laptop, desktop, tablet Yes. Describe... \$400.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, aold, silver No Yes. Describe... Used iewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1950.00 for Part 3. Write that number here ......

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Debt	tor 1 Diane		Turner	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	4: Describe Your I	Financial Assets			
Do	you own or have an	y legal or equitable interest	t in any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.					
E	xamples: Money you ha	we in your wallet, in your home, ir	a safe deposit box, and on I	nand when you file your petition	
	Yes			Cash:	
17.		avings, or other financial accounts Istitutions. If you have multiple ac		es in credit unions, brokerage houses, ion, list each.	
	No ✓ Yes		Institution name:		
		17.1. Checking account:	Citi Bank		\$0.00
		17.2. Checking account:			
		17.3. Savings account:	Bank of America		\$5.00
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.	Examples: Bond funds	or publicly traded stocks , investment accounts with broken	rage firms, money market acc	ounts	
	✓ No ☐ Yes	Institution or issuer name:			
19.	an LLC, partnership,		ited and unincorporated bu	sinesses, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	

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Debt	tor 1 Diane		Turner	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe	checks, promissory not	tes, and money orders.	
	✓ No  Yes. Give specific information about them	Issuer name:			
21.	_		), thrift savings accounts	s, or other pension or profit-sharing plans	
	✓ No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments d deposits you have made so that with landlords, prepaid rent, publi			
	Yes	Electric:	-		
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No  Yes	Issuer name and description:			
		-			

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Debte	or 1 Diane First Name Mid	Turner	Case number (if known)	
0.4		dle Name Last Name		
24.	26 U.S.C. §§ 530(b)(1), 529A(b), and 5	account in a qualified ABLE program, or unde 29(b)(1).	er a qualified state tuition program.	
	No Institution name and des	scription. Separately file the records of any interest	ts.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future interests	in property (other than anything listed in line	1). and rights or powers	
	exercisable for your benefit		, ,	
	Yes. Describe			
26.		de secrets, and other intellectual property sites, proceeds from royalties and licensing agree	ements	
	✓ No  Yes. Describe			
27.	Licenses, franchises, and other gene Examples: Building permits, exclusive licenses.	eral intangibles censes, cooperative association holdings, liquor li	icenses, professional licenses	
	✓ No			
	Yes. Describe			
Mon	ney or property owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or property owed to you?  Tax refunds owed to you			portion you own? Do not deduct secured
				portion you own? Do not deduct secured
	Tax refunds owed to you		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns	r	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years	r		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years	r y, spousal support, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years		State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support  Examples: Past due or lump sum alimon		State:  Local:  divorce settlement, property settlemen	portion you own?  Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years		State:  Local:  divorce settlement, property settlement  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years		State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years		State:  Local:  divorce settlement, property settlement  Alimony:  Maintenance:  Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon No Yes. Give specific information  Other amounts someone owes you Examples: Unpaid wages, disability insur		State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon  ✓ No  Yes. Give specific information  Other amounts someone owes you  Examples: Unpaid wages, disability insur Social Security benefits; unpaid	rance payments, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimon No Yes. Give specific information  Other amounts someone owes you Examples: Unpaid wages, disability insur	rance payments, disability benefits, sick pay, vaca	State: Local:  divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Diane	Turner	Case number (if known)	
	First Name Middle Na	ame Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance;	health savings account (HSA); credit, hor	meowner's, or renter's insurance	
	No  ✓ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	New York Life (Whole Life)	Daughter	\$960.00
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, experimentally because someone has died.		or are currently entitled to receive	
	<b>✓</b> No			
	Yes. Describe			
33.	Claims against third parties, whether or n Examples: Accidents, employment disputes,		demand for payment	
	<b>✓</b> No			
	Yes. Describe			
34.	Other contingent and unliquidated claims to set off claims	s of every nature, including countercla	nims of the debtor and rights	
	<b>▼</b> No			
	Yes. Describe			
35.	Any financial assets you did not already li	st		
	✓ No			
	Yes. Describe			
36.	Add the dollar value of all of your entries for Part 4. Write that number here		. •	\$965.00
	ior Part 4. Write that number here			
Part	5: Describe Any Business-Related P	Property You Own or Have an Inte	erest In. List any real estate in Part	1.
37.	Do you own or have any legal or equitable	interest in any business-related prop	•	Suggest value of the
	No. Go to Part 6.		р	current value of the ortion you own?
	Yes. Go to line 38.			o not deduct secured claims r exemptions
38.	Accounts receivable or commissions you	already earned		
	✓ No			
	Yes. Describe			
00				
39.	Office equipment, furnishings, and supplied Examples: Business-related computers, softw		nines, rugs, telephones, desks, chairs, elect	ronic devices
	<b>✓</b> No			
	Yes. Describe			

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Deb	tor 1 Diane	Turner Case number (if know	n)
ı	First Name	Middle Name Last Name	
40.	Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade	
	<b>✓</b> No		
	Yes. Describe		
	-		
41.	Inventory		
	<b>✓</b> No		
	Yes. Describe		
	Ш		
42.	Interests in partnersh	ips or joint ventures	
	✓ No		
	Yes. Give specific	Name of entity: % of own	iership:
	information about		
	them	<del></del>	<del></del>
			<u> </u>
43.	Customer lists, mailing	lists, or other compilations	
	—		
	No No No No No No No No No		
	Tes. Do your lists if	nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Desc	ribe	
	ш		
44.	Any business-related	property you did not already list	
	<b>✓</b> No		
	lacksquare		
	Yes. Give specific information		
			<u> </u>
			<del></del>
		all of your entries from Part 5, including any entries for pages you have attached	
for Pa	art 5. Write that number	er here	
	Describe Any Fa	arm- and Commercial Fishing-Related Property You Own or Have an Int	rerest In
Part	If you own or have an	n interest in farmland, list it in Part 1.	
16	Do you own or hove o	any legal or equitable interest in any farm- or commercial fishing-related property?	
46.	Do you own or have a	iny legal or equitable interest in any larin- or commercial listing-related property:	Current value of the
	No. Go to Part 7.		portion you own?
	Yes. Go to line 47.		Do not deduct secured claims
	_		or exemptions
47.	Farm animals	outher form roled fish	
	Examples: Livestock, p	ouity, tami-faiseu iisti	
	<b>✓</b> No		
	Yes. Describe		

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Debt				ase number (if known)	
48.			scivanie		
	Yes. Describe				
	_				
49.	Farm and fishing equip	ment, implements, machinery, fixture	s, and tools of trade		
	<b>✓</b> No				
	Yes. Describe				
	_				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	Coopse-lither growing or harvested   Las Name				
Far Name   Model-Anne   Last Name					
51.	Any farm- and commer	rcial fishing-related property you did n	ot already list		
	<b>✓</b> No				
	Yes. Describe				
52. Ad	dd the dollar value of al	I of your entries from Part 6, including	any entries for pages you	have attached	
				_	
Part 7	7: Describe All Pro	perty You Own or Have an Intere	st in That You Did Not L	ist Above	
53.			st?		
		,,			
	information				
E4 A.	dd tha dallau valva af al	Lafvavy antriac from Dout 7. Write the	t	,	
54. A	uu tile uollar value ol al	i of your entities from Part 7. Write tha	t number nere		
Part 8	List the Totals of	Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate	, line 2		<b>&gt;</b>	
		•			
56. <b>p</b>	part 2 total vehicles, line	e 5	\$1362.50		
57. <b>P</b>	art 3: Total personal an	d household items, line 15	\$1950.00		
58. <b>P</b>	art 4: Total financial as	sets, line 36	\$965.00		
59. <b>F</b>	Part 5: Total business-re	elated property, line 45			
60. <b>F</b>	Part 6: Total farm- and f	ishing-related property, line 52			
61. <b>F</b>	Part 7: Total other prope	erty not listed, line 54			
62. <b>T</b>	Total personal property.	Add lines 56 through 61	\$4277 50		± \$4277 50
			Ψ-72.11.00	Copy personal property total	<del>+ ψ+211.30</del>
					\$4277.50
63. <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			

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			Docu	ment Page 20 of	68	
Fill in	this infor	mation to identify your case:				
Debto	or 1	Diane		Turner		
Debtor Debtor Debtor Case nu (ff known)  Offic Sche Be as coinforma as exen addition  For each state a the am tax-exe under a your ex  Part 1:  1. Wr  2. Fo  Bri lin pro  Bri de: Lin Sc  Bri Rei Lin		First Name	Middle Name	Last Name		
	First Name					
United	d States E	Sankruptcy Court for the: Nor	Tumer   Middle Name   Last Name   Middle Name   District of Illinois   (State)   Middle Name   District of Illinois   (State)   Middle Name   District of Illinois   District of			
		<u></u>				
Offi	icial	Form 106C				
Sch	edul	e C: The Propert	y You Claim a	s Exempt		04/16
as executed as a sexual as executed as exe	empt. If it on all page ach iter a specific mount of exempt representations and the specific	more space is needed, fill of ges, write your name and of ges, write your name and of the ges, write you claim and the ges, write you claim are claiming state and federal are claiming federal exemption of the ges, which will be ges, write you claim are claiming state and federal are claiming federal exemptions or schedule	out and attach to this case number (if known sexempt, you must somet. Alternatively, you y limit. Some exempt e unlimited in dollar atto a particular dollar e applicable statutor im as Exempt ning? Check one only, eval nonbankruptcy exemptons. 11 U.S.C. § 522(b)(3.4/B that you claim as exemptons.	page as many copies of Page 2	exemption you narket value of health aids, right claim an exemption the property is	Page as necessary. On the top of any claim. One way of doing so is to the property being exempted up to its to receive certain benefits, and ition of 100% of fair market value determined to exceed that amount
li	ine on So		the portion you own  Copy the value from			Specific laws that allow exemption
			Scriedule A/B			
		Diane   Tumer   Last Name   Last Name   States Bankruptcy Court for the:   Northern   District of   Illinois   (State)				
	Nissa	Diane Tumer First Name Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  District of Illinois (State)  C: The Property You Claim as Exempt  outside a property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim ore space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any so, write your name and case number (if known).  of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to collair amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value at limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, n would be limited to the applicable statutory amount.  fy the Property You Claim as Exempt  of exemptions are you claiming? Check one only, even if your spouse is filling with you.  e claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  e claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  e claiming federal exemptions. 11 U.S.C. § 52(b)(2)  sperty you list on Schedule A/B that you claim as exempt, fill in the information below.  Versa, 2013  Stock of fair market value, up to any applicable statutory limit  Stock only one box for each exemption.  Tals ILCS 5/12-1001(a)  Tals ILCS 5/12-1001(b)				
		<i>A/B:</i> 03				
_						735 ILCS 5/12-1001(a)
С	description Lead		\$500.00	\$500.	00	
	ine from Schedule			100% of fair market va applicable statutory lim		_
(	-	laiming a homestead exemp o adjustment on 4/01/19 and e	-	375? cases filed on or after the date	of adjustment.)	

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$1,000.00 description:  $\checkmark$ \$1,000.00 **Used Household Goods** 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 06 Brief 735 ILCS 5/12-1001(b) \$0.00 description: **✓** Checking account, Citi 100% of fair market value, up to any applicable statutory limit I ine from Schedule A/B: 735 ILCS 5/12-1001(b) \$5.00 description:  $\overline{}$ \$5.00 Savings account, Bank 100% of fair market value, up to any of America applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$400.00 description: V \$400.00 Used mobile, tv, laptop, 100% of fair market value, up to any desktop, tablet applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$50.00 description:  $\overline{}$ \$50.00 **Used jewelry** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(f) \$960.00 description: **V** \$960.00 New York Life (Whole

100% of fair market value, up to any

applicable statutory limit

Life)

31

Line from Schedule A/B:

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			Do	current 1 age 22 or t	00		
Fill in	this infor	mation to identify your cas	se:				
Debto	or 1	Diane		Turner			
Debto	or 2 e, if filing)	First Name	Middle Name	Last Name			
(Spous	e, ii iiiiig <i>)</i>	First Name	Middle Name	Last Name			
United	d States B	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If know	number vn)			(Giato)			
Off	icial	Form 106D			•		Check if this is a amended filing
Scl	hedu	le D: Credito	ors Who Ha	ve Claims Secure	ed by Prop	ertv	12/1
1. [	Oo any condition No. Condition Yes.  1: List A	Fill in all of the information	it this form to the court was below.	with your other schedules. You hav			Column C
2.	separate	•	an one creditor has a part	ured claim, list the creditor ticular claim, list the other creditors in der according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		NANCIAL	Describe the property	that secures the claim:	\$10,746.00	\$2,725.00	\$8,021.00
	Numb	er Street	Contingent	, the claim is: Check all that apply.			
	City	State ZIP Code es the debt? Check one.	Unliquidated Disputed				
		tor 1 only	Nature of lien. Check a	all that apply.			
		tor 2 only tor 1 and Debtor 2 only	car loan)	made (such as mortgage or secured			
		east one of the debtors another	Statutory lien (such  Judgment lien from	as tax lien, mechanic's lien) n a lawsuit			
		ck if this claim relates community debt	Other (including a ri	ight to offset)			
	Date de incurred	bt was <u>5/2016</u>	Last 4 digits of accou	nt number0847			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$10,746.00

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Fill i	n this infori	mation to identify your c	ase:					
Deb	tor 1	Diane		Turner				
		First Name	Middle Name	Last Name				
Deb		E:	NAC LILL NI					
(Spot	use, if filing)	First Name	Middle Name	Last Name				
Unit	ed States B	ankruptcy Court for the:	Northern	_ District of Illinois (State)				
Case (If knd	e number own)							
Off	icial F	orm 106E/F				Che	eck if this is an	n amended filing
Sc	hedu	ıle E/F: Cre	ditors Who	Have Unse	cured Claims			12/15
Form clain the e know	106A/B) ans that are entries in the sinth (n).	and on Schedule G: Exe listed in Schedule D: C	cutory Contracts and Une reditors Who Hold Claims tach the Continuation Pa	expired Leases (Official Secured by Property. I	<ul> <li>Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v</li> </ul>	ny creditor the Part yo	rs with partia ou need, fill i	ally secured it out, number
1.	-	reditors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, ider As much a Continuati	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority amount ding to the creditor's nam particular claim, list the ot		both priority	and nonprio	rity amounts.
						Total claim	Priority amount	Nonpriority amount

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Debte	or 1	Diane First Name Middle Name	Turner Last Name	Case number (if known)	
Dowt	٥.	List All of Your NONPRIORITY Unsecured			
Part					
[	<u>√</u>	any creditors have nonpriority unsecured claims  No. You have nothing to report in this part. Subn  Yes.	-	e court with your other schedules.	
l I	inse f m	ecured claim, list the creditor separately for each claim	. For each claim	er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill ou	cluded in Part 1.
	_				Total claim
4.1	-	estBuy/CBNA conpriority Creditor's Name		Last 4 digits of account number	\$2,000.00
	P	D BOX 6497		When was the debt incurred?n/a	
	Nı	umber Street		As of the date you file, the claim is: Check all that apply.  Contingent	
	SI	OUX FALLS South Dakota 5711	7	Unliquidated	
	Ci			Disputed	
		ho incurred the debt? Check one.  Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Ľ	Debtor 2 only		Student loans	
		Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Ē	At least one of the debtors and another		Debts to pension or profit-sharing plans, and other similar debts	
		Check if this claim relates to a community del	ot	Other. Specify Unsecured debt	
	Is	the claim subject to offset?			
	<u></u>	No Yes			
4.0		APITALONE			Ф1 014 00
4.2	No	onpriority Creditor's Name		Last 4 digits of account number 0371  When was the debt incurred? 9/2015	\$1,014.00
	_	D BOX 30253 umber Street			
	_			As of the date you file, the claim is: Check all that apply.	
	SA	ALT LAKE CITY Utah 8413	0	Contingent	
	Ci	,	ode	Unliquidated	
	W	ho incurred the debt? Check one.  Debtor 1 only		Disputed	
		Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	H	Debtor 1 and Debtor 2 only		Student loans	
	L	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ □ Check if this claim relates to a community del	ot	Debts to pension or profit-sharing plans, and other similar debts	
	∟ Is	the claim subject to offset?		Other. Specify CreditCard	
	~	No No			
		Yes			
4.3	CI	B/CARSONS		Last 4 digits of account number 0322	\$6,370.00
		onpriority Creditor's Name D Box 659813		When was the debt incurred? 6/2007	
	-	umber Street		As of the date you file, the claim is: Check all that apply.	
	_			Contingent	
	-	an Antonio Texas 7826 tv State Zip C		Unliquidated	
		ty State Zip C ho incurred the debt? Check one.	ode	Disputed	
	~	Debter 1 and		Type of NONPRIORITY unsecured claim:	
		Debtor 2 only		Student loans	
		Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or	
	Ē	At least one of the debtors and another		divorce that you did not report as priority claims	
	Ē	Check if this claim relates to a community del	ot	Debts to pension or profit-sharing plans, and other similar debts	
	ls	the claim subject to offset?		✓ Other. Specify CreditCard	
	<u>-</u>	/ No Yes		_	

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CB/VICSCRT \$747.00 6705 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD When was the debt incurred? 10/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent WESTERVILLE 43081 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt CreditCard Other. Specify Is the claim subject to offset? V **✓** No Yes <u>C</u>BNA \$2,471.00 Last 4 digits of account number 6997 Nonpriority Creditor's Name When was the debt incurred? 5/2018 Po Box 6497 Number Street As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls South Dakota 57117 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only  $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes CHASE CARD 4.6 \$1,032.00 Last 4 digits of account number 0143 Nonpriority Creditor's Name When was the debt incurred? 6/1998 BANK ONE CARD SERV 2500 WESTFIELD DRI Number Street As of the date you file, the claim is: Check all that apply. Contingent 60124 **ELGIN** Illinois Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only  $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

✓ No ✓ Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts Other. Specify

Debts to pension or profit-sharing plans, and other similar

CreditCard

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 COMENITYBANK/KAY \$104.00 0679 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2017 3100 Easton Square Place Street Number As of the date you file, the claim is: Check all that apply. Contingent 43219 Columbus Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt CreditCard Other. Specify Is the claim subject to offset? V No Yes 4.8 COMENITYCB/HSN \$1,409.00 3519 Last 4 digits of account number Nonpriority Creditor's Name 995 W 122ND AVE When was the debt incurred? 12/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent WESTMINSTER Colorado 80234 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only  $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes **CREDITONEBNK** 4.9 \$1,173.00 Last 4 digits of account number 9634 Nonpriority Creditor's Name When was the debt incurred? PO BOX 98872 10/2015 Number As of the date you file, the claim is: Check all that apply. Contingent 89193 LAS VEGAS Nevada Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only  $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 FIRST PREMIER BANK \$808.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 6/2012 Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud 56302 Minnesota Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes **FST PREMIER** 4.11 \$540.00 3636 Last 4 digits of account number Nonpriority Creditor's Name 900 W DELAWARE When was the debt incurred? 8/2007 Number As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57104 Unliquidated City State Zip Code Who incurred the debt? Check one Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? CreditCard **✓** No Yes 4.12 **MCYDSNB** \$3<u>12</u>.00 Last 4 digits of account number 2025 Nonpriority Creditor's Name When was the debt incurred? 9111 DUKE BLVD 1/2018 Number As of the date you file, the claim is: Check all that apply. Contingent 45040 MASON Ohio Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? No

Yes

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 \$850.00 Last 4 digits of account number Nonpriority Creditor's Name 6843 N Franklin Ave When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 80538 Colorado Loveland City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_ Payday Loan Is the claim subject to offset? No ◪ Yes SYNCB/WALMART \$495.00 Last 4 digits of account number \_ 8517 Nonpriority Creditor's Name When was the debt incurred? 10/2017 Po Box 530927 Street Number As of the date you file, the claim is: Check all that apply. Contingent Atlanta 30353 Georgia Unliquidated Citv State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.15 TARGET/TD \$2,030.00 Last 4 digits of account number 8374 Nonpriority Creditor's Name When was the debt incurred? 11/2007 PO BOX 673 Number As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS 55440 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Diane		Turner	Case number (if known)
First Name	Middle Name	Last Name	
Part 2: Your NONPRIORITY	/ Unsecured Claims -	Continuation Page	
After listing any entries	on this page, number the	m beginning with 4.5, fo	lowed by 4.6, and so forth. Total claim
4.16 WEBBNK/FHUT		Last 4	ligits of account number 2645 \$830.00
Nonpriority Creditor's Nam 6250 RIDGEWOOD ROA	ie		vas the debt incurred? 2/2013
Number Street			
			e date you file, the claim is: Check all that apply.
			ntingent
SAINT CLOUD City	Minnesota 563 State Zip 0	03 Code Uni	quidated
Who incurred the debt?	•		puted
Debtor 1 only		Type of	NONPRIORITY unsecured claim:
Debtor 2 only			dent loans
Debtor 1 and Debtor 2	2 only	=	
<b></b>	•		igations arising out of a separation agreement or orce that you did not report as priority claims
At least one of the deb	otors and another	_	ots to pension or profit-sharing plans, and other similar
Check if this claim r	elates to a community de		1 01 /
Is the claim subject to o	ffset?	<b>✓</b> Oth	er. Specify CreditCard
<b>✓</b> No			
Yes			

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2

> 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6h. Debts to pension or profit-sharing plans, and other similar

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

\$0.00

\$0.00

\$22,185.00

\$22,185.00

6h.

6j.

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Diane		Turner	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	,
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or comp	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	Landlord Name 1245 North Kild	are		Residential Lease, Debtor is Lessee, Month to Month
	Number Chicago	Street Illinois	60651	
	City	State	Zip Code	

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			Do	cument Page 3	32 of 68	8
Fill in	this infor	nation to identify your c	ase:			
Debto	or 1	Diane		Turner		
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 se, if filing)	First Name	Middle Name	Last Name		
Unite	-l Ct-t D					
United	d States B	ankruptcy Court for the:	Nortnern	_ District of Illinois (State)	<del></del>	
Case (If know	number					
(II IUIOVI	****					Check if this is an
						amended filing
Off	icial	Form 106H				
Sch	edul	e H: Your Co	lehtors			12/15
				te vou may have. Be as or	omplete a	nd accurate as possible. If two married people are
						eded, copy the Additional Page, fill it out, and number
		he boxes on the left. At r every question.	tach the Additional Page	to this page. On the top of	of any Add	litional Pages, write your name and case number (if
1.	Do you l	,	you are filing a joint case, d	o not list either spouse as a	codebtor.)	)
	Ye					
2.			u lived in a community o	conorty state or torritory?	(Commun	nity property states and territories include Arizona,
2.				o, Texas, Washington, and		
	✓ No	. Go to line 3.				
	☐ Ye	, ,	ner spouse, or legal equiv	alent live with you at the ti	ime?	
	$oxed{oldsymbol{ u}}$	No	. N 1 . 1	r . 0		
	Ш	Yes. In which commu	nity state or territory did y	ou live?	Fill in ti	he name and current address of that person.
		Name of your spouse. f	ormer spouse, or legal equi	valent		
		Number Street				
		City	State	Zip Code		
	la Calaa	<b>d</b>	-h4 D		<b>.</b>	one in Elian with were I intake a common about in line O
3.	again as	a codebtor only if that	person is a guarantor or	cosigner. Make sure you	have liste	use is filing with you. List the person shown in line 2 d the creditor on Schedule D (Official Form 106D), schedule E/F, or Schedule G to fill out Column 2.
	Column	1: Your codebtor			Colu	ımn 2: The creditor to whom you owe the debt
					Chec	ck all schedules that apply:
3.1	Turner, A	Asia			— <b></b>	Schedule D, line 2.1
	Name	11242 S Indiana Av	e Ant 2			Schedule E/F. line
1		11272 O IIIUlalia AV	UIPLE			

60628

Zip Code

Schedule G, line \_\_

Number

Chicago

City

Street

Illinois

State

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Fill in this in	formation to identify	your case:		-				
Debtor 1 Debtor 2	Diane First Name	Middle Name	Turner Last Na	ame	- Che	eck if this is:		
(Spouse, if filing	First Name	Middle Name	Last Na	ame	·   □	An amended filing		
the: Case number	Bankruptcy Court for	Northern	_ District of Illii (S	nois tate)		A supplement showing post-petition chapt expenses as of the following date:	er 13	
(lf known)						MM / DD / YYYY		
Official	Form 106I							
Schedu	le I: Your In	come					12/15	
information a spouse. If mo number (if kr	about your spouse. I	f you are separated and , attach a separate she y question.	d your spous	e is not filing	with you, do	r spouse is living with you, include not include information about your ional pages, write your name and ca	se	
Fill in you     information	ır employment		Debtor 1			Debtor 2  Employed  Not Employed		
If you hav attach a se	e more than one job, eparate page with n about additional	Employment status	Emplo	yed nployed				
employers		Occupation	Tax pro			_	_	
self-emplo	art time, seasonal, or byed work.	Employer's name		ssional Resource	s LLC		_	
	n may include student aker, if it applies.	Employer's address	One H&R E			Number Street	<u> </u>	
			Kansas Cit City	y Missouri State	64105 Zip Code	City State Zip Code	<u> </u>	
		How long employed there?	20 years 4	months				
Part 2: Giv	ve Details About N							
spouse unles	ss you are separated.					write \$0 in the space. Include your non-filin or that person on the lines below. If you nee		
	attach a separate she				ebtor 1	For Debtor 2 or	<del>J</del> U	
		ary, and commissions (befo , calculate what the monthly		2.	\$480.00	non-filing spouse		
3. Estimat	e and list monthly over	rtime pay.		3.	+ \$0.00			
4. Calcula	te gross income. Add li	ne 2 + line 3.		4.	\$480.00			

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Debtor 1Diane First Name		urner ast Name	Case number		
First Name	Middle Name L	ast Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		<b>→</b> 4.	\$480.00		
5. List all payroll deductions:					
5a. Tax, Medicare, and Social	Security deductions	5a.	\$0.00		
5b. Mandatory contributions f	or retirement plans	5b.	\$0.00		
5c. Voluntary contributions for	r retirement plans	5c.	\$0.00		
5d. Required repayments of re	·	5d.	\$0.00		
5e. <b>Insurance</b>		5e.	\$0.00		
5f. Domestic support obligation	ons	5f.	\$0.00		
5g. Union dues		5g.	\$0.00		
5h. Other deductions. Specify:		_	\$0.00 +		
6. Add the payroll deductions. Ad+5h.			\$0.00		
7. Calculate total monthly take-h	nome pay. Subtract line 6 from line	4. 7.	\$480.00		
8. List all other income regularly	received:				
8a. Net income from rental probusiness, profession, or fai	rm				
	property and business showing necessary business expenses, and	8a.	\$0.00		
8b. Interest and dividends		8b.	\$0.00		
8c. Family support payments t dependent regularly receiv	that you, a non-filing spouse, or a	ı			
Include alimony, spousal sup divorce settlement, and prop	pport, child support, maintenance, erty settlement.	8c.	\$0.00		
8d. Unemployment compensa	tion	8d.	\$0.00		
8e. Social Security		8e.	\$1,616.00		
	the value (if known) of any non- eive, such as food stamps (benefits	8f.	\$0.00		
8g. Pension or retirement inc	ome	8g.	\$1,672.70		
8h. Other monthly income. Sp	ecify:	8h. +	\$0.00 +		
9. Add all other income Add lines	8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9.	\$3,288.70		
10. Calculate monthly income. Ad Add the entries in line 10 for Deb	dd line 7 + line 9. tor 1 and Debtor 2 or non-filing sp	10. ouse	\$3,768.70 +		= \$3,768.70
friends or relatives.	butions to the expenses that you nmarried partner, members of your leady included in lines 2-10 or amou	nousehold, you	dependents, your roomn		
Specify:					11. + \$0.00
12. Add the amount in the last co Write that amount on the Summ	olumn of line 10 to the amount in eary of Schedules and Statistical Sur				12. \$3,768.70  Combined monthly income
13. Do you expect an increase or No.	decrease within the year after y	ou file this forr	n?		-
Yes. Explain:					

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		Docu	ment Page 35 of 68			
Fill in this infor	mation to identify yo	ur case:				
Debtor 1	Diane		Turner			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2					. ~	
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filin	ıg	
United States E	Bankruptcy Court for t	he: Northern [	District of Illinois (State)		nowing post-petitior the following date:	n chapter 13
Case number (If known)				MM / DD / YYYY	<del>,</del> _	
Official	Form 106	J				
Schedul	e J: Your Ex	- xpenses				12/15
information. If (if known). Ans	-	ed, attach another sheet to this	e filing together, both are equally form. On the top of any additional			nber
1. Is this a joi	nt case?					
No Go	to line 2					
Yes. D	oes Debtor 2 live in	a separate household?				
Г	No					
	■ ■ Yes Debtor 2 mus	st file Official Forms 106.I-2 Expen	ses for Separate Household of Debto	or 2		
L		<u> </u>	occinent expansion reaccinera en 2001.			
2. Do you nav	e dependents?	No				
Do not list Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to	Dependent's	Does dependen	ıt live
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you? No.	
			Relative	25 years		
					✓ Yes.	
	enses include	I No				
expenses o	f people other	No				
yourself an	d your	Yes				
dependents	s?					
Part 2: Esti	mate Your Ongoir	ng Monthly Expenses				
				mant in a Chantau 1	2 2222 to report	
	of a date after the ba		ou are using this form as a supple plemental Schedule J, check the			е
		on-cash government assistance i ed it on Sc <i>hedule I: Your Incom</i> e			Your	expenses
	or home ownership or the ground or lot. 4		clude first mortgage payments and		4.	\$550.00
If not incl	uded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Prope	ty, homeowner's, or	renter's insurance			4b.	\$0.00
4c. Home	maintenance, repair.	and upkeep expenses			4c.	\$0.00
	, , ,					Ψ0.00

4d.

\$0.00

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Diane
 Turner
 Case number (if known)

 Last Name
 Last Name

i ilst ivaire iviidde ivaire Last ivaire		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$300.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$275.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$375.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$15.00
10. Personal care products and services	10.	\$15.00
11. Medical and dental expenses	11.	\$10.00
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments	12.	\$100.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$80.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$154.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	10	
17a. Car payments for Vehicle 1	17a	\$273.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify: SSI Income Exemption	17c	\$1,616.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property	200	\$0.00
20b. Real estate taxes.	20a 20b	\$0.00 \$0.00
20c. Property, homeowner's, or renter's insurance	20b	<del></del>
20d. Maintenance, repair, and upkeep expenses.	20c	\$0.00
20e. Homeowner's association or condominium dues	20d	\$0.00
253. Tomos a dosodator of contaminant ados	20e	\$0.00

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Debtor 1				Turner	Case number (if known)		
	First Na	ame	Middle Name	Last Name			
21. <b>Othe</b>	r. Spec	ify:				21	\$0.00
	-	our monthly expense	es.				\$3,763.00
		es 4 through 21.					\$0.00
		ne 22 (monthly expens			\$3,763.00		
22c. /	Add line	e 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23.Calcu	ılate y	our monthly net inco	me.				
23a. (	Copy lir	ne 12 (your combined	monthly income) from	Schedule I.		23a	\$3,768.70
23b.	23b. Copy your monthly expenses from line 22 above.					23b	\$3,763.00
	23c. Subtract your monthly expenses from your monthly incor			ncome.			\$5.70
	The result is your monthly net income.					23c	
Fore	- example	e, do you expect to fini	ish paying for your car l	ses within the year after can within the year or do yo nodification to the terms of	ou expect your		
	No	ay	300.0000 2000000 0. u .		you mongago.		
<b>✓</b> 1	NO						
	res .						
		Explain here:					
	L						

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Fill in this information to identify your case:							
Debtor 1	Diane		Turner				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			(Otato)				

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	nelp you fill out bankruptcy forms?
	<b>☑</b> No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and
×	/s/ Diane Turner	*
	Signature of Debtor 1	Signature of Debtor 2
	Date 5/29/2018	Date
	MM/DD/YYYY	MM/DD/YYYY

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Fill in this i	information to identify your	case:					
Debtor 1	Diane		Turner				
Debtor 2	First Name	Middle N	Name Last Nam	е			
(Spouse, if fili	ing) First Name	Middle N	Name Last Nam	е			
United Sta	ates Bankruptcy Court for the	e: Northern	District of Illino				
Case num	ber		(Stat	e)			
(If known)							Check if this is a
Officia	al Form 107						amended filing
Staten	nent of Financi	al Affairs f	or Individuals	Filing for	r Bankru	ıptcy	04/1
informatio	nplete and accurate as p on. If more space is need if known). Answer every	ded, attach a sepa					
Part 1:	Give Details About You	r Marital Status	and Where You Lived	Before			
1. Wha	at is your current marital s	status?					
	Married						
	Not married						
2. Duri	ing the last 3 years, have	you lived anywhere	e other than where you li	ve now?			
<b>✓</b>	No Yes. List all of the places	you lived in the last	: 3 years. Do not include v	where you live r	now.		
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
				Same as	Debtor 1		Same as Debtor 1
	Number Street		From	Number Stre	eet		From
			To				To
	City State	Zip Code		City	State	Zip Code	
-	Oity State	Zip Code			Debtor 1	Zip Code	Same as Debtor 1
				Ш			ы
	Number Street		From	Number Stre	eet		From
			To	_			To
	City State	Zip Code		City	State	Zip Code	
	-	·		-			
	n the last 8 years, did you erritories include Arizona, Cal						
<b>▼</b> N	No						
	Yes. Make sure you fill out	Schedule H: Your	Codebtors (Official Form	106H).			

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages,  $\overline{\mathbf{A}}$ Wages, \$5700.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$3570.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$5000.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016 ) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) \$8,825.00 Est. Pension From January 1 of current year until Est. SSI \$8,080.00 the date you filed for bankruptcy: Est. Pension \$21,180.00 For last calendar year: Est. SSI \$19,392.00 (January 1 to December 31, 2017 Est. Pension \$21,180.00 For the calendar year before that: Est. SSI \$19,392.00 (January 1 to December 31, 2016

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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1	Diane				rner	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi orp	ders include your porations of which	relatives; a you are a for a busir	iny general partner an officer, director, ness you operate a	s; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; securities; and any managing domestic support obligations,
7	No						
	Yes. List all pay	ments to	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No	_	ranteed or cosigne t benefited an ins	·	Total amount paid	Amount you still owe	Reason for this payment
					P		Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
_		State	Zip Code				
_	City	State	Zip Code				
_	City Insider's Name	State	Zip Code				

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	or 1	Diane First Name	Middle Name	Turner Last Name	Case number (if known)		
11.		thin 90 days before you filed fo counts or refuse to make a pay			ank or financial institution,	set off any amoui	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code				
12.		hin 1 year before you filed for bointed receiver, a custodian, o		y of your property in the p	ossession of an assignee fo	r the benefit of c	reditors, a court-
	<b>✓</b>	No Yes					
Part	5:	List Certain Gifts and Con	tributions				
13.	Wi	thin 2 years before you filed fo	r bankruptcy, did ye	ou give any gifts with a to	tal value of more than \$600	per person?	
	<b>✓</b>	No Yes. Fill in the details for eacl	h gift.				
		Gifts with a total value of mo per person	re than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	Gift				
		- Terson to whom You dave the					
		Number Street					
		City State	Zip Code				
		Person's relationship to you					
		Person to Whom You Gave the	Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you					

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	lOI I	Diane		Turner	Case number (if known)		
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you filed fo	or bankruptcy, did	you give any gifts or contribu	tions with a total value of	more than \$600	to any charity?
		No					
	⊻						
	П	Yes. Fill in the details for each	h gift or contribution	on.			
		Gifts or contributions to cha	arities	Describe what you contri	huted	Date you	Value
		that total more than \$600	arrico	Describe what you contin	buteu	contributed	Value
		that total more than \$600				Contributed	
		Charity's Name					
		•					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
15.	\A/i+	hin 1 year before you filed for	hankruntov or ein	co you filed for bankruptey d	id you lose anything been	use of theft fire	other disaster or
13.		nbling?	ballkruptcy of sill	ce you med for bankruptcy, d	id you lose anything beca	use of their, me,	other disaster, or
	yan						
	$\overline{\mathbf{A}}$	No					
	Ħ	Yes. Fill in the details.					
	Ш	res. Fill in the details.					
		Describe the property you le	ost and	Describe any insurance of	overage for the loss	Date of your	Value of property
		how the loss occurred		Include the amount that ins	surance has paid. List	loss	lost
				pending insurance claims of			
				A/B: Property.			
		1:10.1:5	<b>-</b>				
Part		List Certain Payments or	i i alisiei s				
	abo	hin 1 year before you filed for out seeking bankruptcy or pre	paring a bankrupt	cy petition?			anyone you consulted
	abo		paring a bankrupt	cy petition?			anyone you consulted
	abo Incl	out seeking bankruptcy or pre ude any attorneys, bankruptcy p	paring a bankrupt	cy petition?			anyone you consulted
	abo	out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	paring a bankrupt	cy petition? credit counseling agencies for	services required in your bar	kruptcy.	
	abo Incl	out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a	services required in your bar	kruptcy.  Date payment	Amount of
	abo Incl	out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	paring a bankrupt	cy petition? credit counseling agencies for	services required in your bar	kruptcy.  Date payment or transfer	
	abo Incl	out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a	services required in your bar	Date payment or transfer was made	Amount of
	abo Incl	out seeking bankruptcy or preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys preude any attorney	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a	services required in your bar	kruptcy.  Date payment or transfer	Amount of
	abo Incl	out seeking bankruptcy or preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys preude any attorneys, bankruptcy preude any attorneys preude any	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	out seeking bankruptcy or preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys preude any attorney	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	out seeking bankruptcy or preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys, bankruptcy preude any attorneys preude any attorneys, bankruptcy preude any attorneys preude any	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue	paring a bankrupt	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois	eparing a bankrupt petition preparers, or	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	eparing a bankrupt petition preparers, or	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois	eparing a bankrupt petition preparers, or	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State	eparing a bankrupt petition preparers, or	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Email or website address None Person Who Mas Paid  Person Who Made the Payme  Person Who Was Paid  Number Street	60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme	eparing a bankrupt petition preparers, or 60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme  Person Who Was Paid  Number Street  Chicago Illinois City State  Chicago Illinois City State  Chicago State  Chicago Illinois City State  Chicago Illinois City State	60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Email or website address None Person Who Mas Paid  Person Who Made the Payme  Person Who Was Paid  Number Street	60643 Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment
	abo Incl	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address None Person Who Made the Payme  Person Who Was Paid  Number Street  Chicago Illinois City State  Chicago Illinois City State  Chicago State  Chicago Illinois City State  Chicago Illinois City State	60643 Zip Code  Zip Code	cy petition? credit counseling agencies for Description and value of a transferred	services required in your bar	Date payment or transfer was made	Amount of payment

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Debt		Diane		Turner	Case number <i>(if known)</i>	·	
		First Name	Middle Name	Last Name			
17.	help	nin 1 year before you filed to you deal with your credito not include any payment or to	ors or to make paym		half pay or transfer	any property to a	nyone who promised to
	<b>✓</b>	No Yes. Fill in the details.					
				Description and value of any protransferred	perty	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
18.	<b>the</b> Incl	ordinary course of your busined both outright transfers are transfers that you have alread No	siness or financial af nd transfers made as s	ecurity (such as the granting of a secur			
		Yes. Fill in the details.		Description and value of propert transferred		ceived or debts p	Date transfer was made
		Person Who Received Trans	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Trans	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.	ben	nin 10 years before you file eficiary? ese are often called asset-prot		I you transfer any property to a self-	settled trust or sim	ilar device of whi	ch you are a
	<b>✓</b>	No Yes. Fill in the details.					
	_			Description and value of the pr	operty transferred		Date transfer was made
		Name of trust					

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Debtor 1 Diane Turner Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Diane Turner Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb	tor 1				Turi		Cas	se number (i	f known)		
		First Name		Middle Name	Last	Name					
26.	Hav	e you been a party	y in any judici	al or administ	rative procee	ding under	any environmer	ntal law? In	nclude settlements a	and orders.	
		No Yes. Fill in the det	ails.								
					Court or age	ncy		Nature	of the case		Status of the case
		Case title			Court Name						Pending
		Case number			NumberStreet	t					On appeal
					City	State	Zip Code				Concluded
Part	11:	Give Details Ab	oout Your B	usiness or Co	onnections	to Any Bu	siness				
27.	Witl	nin 4 years before	you filed for b	oankruptcy, die	d you own a b	ousiness or	have any of the	following o	connections to any b	ousiness?	
				-	-		activity, either f	full-time or p	oart-time		
		A member of A partner in a		lity company (i	LC) or limited	а навінту ра	artnership (LLP)				
		An officer, die	rector, or mar	naging executiv	-						
				the voting or e		es of a corp	poration				
		No. None of the a Yes. Check all tha				y for each h	nusiness				
	Ш	roo. Grook an are	ar apply abov				ure of the busine	ess	Employer Identific		
									include Social Se	curity num	ber or IIIN.
		Business Name									
		Number Street			Name	of account	ant or bookkeep	per	Dates business ex	xisted	
		City	State	Zip Code					From	Го	<del></del>
					Descri	be the natu	ure of the busine	ess	Employer Identificinclude Social Se		
		Business Name			_				EIN:		
		Number Street			_				Dates business ex	xisted	
		City	State	Zip Code	Name -	of account	ant or bookkeep	per	From	Το	
		Oily	Otato	<b>2.p 0000</b>					From		_
					Descri	be the natu	ure of the busine	ess	Employer Identific include Social Se		
		Business Name			_				EIN:		
		Number Street			— Name	of account	ant or bookkeer	per	Dates business ex	xisted	
		City	State	Zip Code	_				From	Го	_

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Debt	tor 1	Diane			Turner	Case number (if known)
		First Name		Middle Name	Last Name	
28.		ditors, or other p	-	r bankruptcy, did you	ı give a financial statement	to anyone about your business? Include all financial institutions,
	✓	No				
		Yes. Fill in the d	etails below.			
					Date issued	
		News			MM/DD/YYYY	
		Name			WIW/DD/TTTT	
		Number Street	:			
		City	State	Zip Code		
Part	12:	Sign Below				
		kruptcy case ca		nes up to \$250,000, o	r imprisonment for up to 20	y, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			ature of Debto	•		Signature of Debtor 2
		Data	F /00 /0010			Date
		Date	5/29/2018			
	Oid yo	ou attach additio	onal pages to	Your Statement of F	inancial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
Į.	<b>√</b> N	lo				
Ī	$\exists$	'es				
	Did yo	ou pay or agree	to pay some	ne who is not an atte	orney to help you fill out ba	nkruptcy forms?
[.	<b>√</b> N	lo				
j	<u> </u>	es. Name of pers	on			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Diane		Turner
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.								
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?						
	Creditor's name: ALLY FINANCIAL  Description of property securing debt: 2013 Nissan Versa	Surrender the property.  ☐ Retain the property and redeem it.  ☐ Retain the property and enter into a Reaffirmation Agreement.  ☐ Retain the property and [explain]:	No. ✓ Yes.						
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.						
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.						
	Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.						

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Debto	or Diane		Turner	Case number (i	f
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Pe	ersonal Property Lease	es		
inform		l estate leases. Unexpired	leases are leases tha	at are still in effect; the lea	ed Leases (Official Form 106G), fill in the ase period has not yet ended. You may
D	escribe your unexpired perso	onal property leases			Will the lease be assumed?
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
L	essor's name:				□ No □ Yes
	escription of leased roperty:				
Part 3	Sign Below				
Un			ny intention about an	ny property of my estate th	at secures a debt and any personal
4 -			<b>A</b> -		
	/s/ Diane Turner Signature of Debtor 1		* =	Signature of Debtor 2	
	Date <u>5/29/2018</u> MM/DD/YYYY		С	Date MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Nortnern	District of Illinois		
In re	Diane Turner		Case	No.	
_	Debtor				(If known)
			Chap	oter	Chapter 7
	DISCLOSURE OF	COMPENSA	ATION OF ATTOR	NEY FO	OR DEBTOR
1	. Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered or to be rendered on behalt	year before the filing	of the petition in bankruptcy,	or agreed to	be paid to me, for services
	For legal services, I have agreed to a	ccept			\$1,765.00
	Prior to the filing of this statement I	have received			\$0.00
	Balance Due				\$1,765.00
2	. The source of the compensation pai	d to me was:			
	<b>✓</b> Debtor	Other (s	specify)		
3	. The source of the compensation pai	d to me is:			
	<b>✓</b> Debtor	Other (s	specify)		
4	. I have not agreed to share the all members and associates of my		ensation with any other persor	unless they	are
	I have agreed to share the above members or associates of my latthe people sharing in the compe	w firm. A copy of the			
5	. In return for the above-disclosed fee	e, I have agreed to ren	der legal service for all aspects	of the bankr	uptcy case, including:
	<ul> <li>a. Analysis of the debtor's final bankruptcy;</li> </ul>	ncial situation, and re	ndering advice to the debtor in	determining	whether to file a petition in
	b. Preparation and filing of any	petition, schedules, s	statements of affairs and plan v	vhich may be	e required;
	c. Representation of the debtor	at the meeting of cre	ditors and confirmation hearin	g, and any ac	djourned hearings thereof;
6	. By agreement with the debtor(s), the	above-disclosed fee	does not include the following	services:	
		CE	RTIFICATION		
	I certify that the foregoing is a comple tor(s) in this bankruptcy proceedings.	te statement of any a	greement or arrangement for pa	ayment to me	e for representation of the
	5/29/2018		/s/ Alexander F	Preber	
	Date		Signature of Att	orney	
			Semrad Law F	Firm	
			Name of law t	firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

		filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Turner, Diane	Case No	
	Debtor(s)	0.000 110.	
		Chapter.	Chapter7
	VERIF	ICATION OF CREDITOR MAT	RIX
Th knowledge	•	ify that the attached list of creditors is tru	ue and correct to the best of their
Date:	5/29/2018	/s/ Turner, Diane	
		Turner, Diane Signature of Deb	tor

ALLY FINANCIAL c/o: C T Corporation System 208 So Lasalle St, Suite 814 Chicago, IL, 60604

CB/CARSONS PO Box 659813 San Antonio, TX, 78265

CBNA Po Box 6497 Sioux Falls, SD, 57117

TARGET/TD PO BOX 673 MINNEAPOLIS, MN, 55440

COMENITYCB/HSN 995 W 122ND AVE WESTMINSTER, CO, 80234

CREDITONEBNK PO BOX 98872 LAS VEGAS, NV, 89193

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

CAPITALONE c/o Pollack & Rosen, P.C 1825 Barrett Lakes Blvd Suite 510 Kennesaw, GA, 30144

WEBBNK/FHUT 6250 RIDGEWOOD ROA SAINT CLOUD, MN, 56303

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

CB/VICSCRT 220 W SCHROCK RD WESTERVILLE, OH, 43081 FST PREMIER 601 S Minneapolis Ave Sioux Falls, SD, 57104

SYNCB/WALMART Po Box 530927 Atlanta, GA, 30353

MCYDSNB 3911 S Walton Walker Blvd Dallas, TX, 75265

COMENITYBANK/KAY 3100 Easton Square Place Columbus, OH, 43219

PLS 3175 175th St Suite 3 Hazel Crest, IL, 60429

BestBuy/CBNA PO BOX 6497 SIOUX FALLS, SD, 57117

## CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1765.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information

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necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 05/29/2018

Client Liane Surner

Client

Attorney Man h

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Debtor 1	Diane First Name	Middle Name	Turner	Cas	se number (if known)			
	FIIST NAME	Widdle Name	Last Name	Colum <b>Debto</b>	20.52	Column B Debtor 2 or non-filing spous	e	
Do no		n contend that the amount nstead, list it here:	↓	\$ <u>0.00</u>			_	
	our spouse		\$1,616.00 \$0.00					
	on or retirement incom t under the Social Securi	ne. Do not include any am ny Act.	ount received that was	a \$1,765	5.94		=	
amou payme interna	nt. Do not include any beents received as a victim	ces not listed above.Spe enefits received under the of a war crime, a crime aga ism. If necessary, list othe	Social Security Act or ainst humanity, or	÷				
Total a	amounts from separate p	ages, if any.		+\$0.00	0	+	- -  -  -	
each		nt monthly income. Add		\$ <u>2,58</u>	2.11 +		_ -	<u>\$2,582.11</u>
COIL	imn. Then add the total t	or Column A to the total f	or Column B.				!	Total current
Part 2:	Determine Whether	the Means Test App	lies to You				r	nonthly income
	n new mm • and rest of small a session subsequent	thly income for the year onthly income from line 1	H		Carry lin	. 44 5		
	Multiply by 12 (the numb				Copy line	e 11 here →		\$2,582.11 X 12
		income for this part of the	form.			1		\$30,985.32
13 Calcu	late the median family	income that applies to	you. Follow these step	os:				
Fill in	the state in which you liv	е.	Illinois					
Fill in	the number of people in	your household.	2	And the second				
Fill in house		e for your state and size o	f		en e	16773696660000000000000000000000000000000	13.	\$68,687.00
To fin	d a list of applicable med	ian income amounts, go d list may also be available a	online using the link sp at the bankruptcy clerk'	ecified in the separa	ate			
14. <b>How</b>	do the lines compare?							
14a.	Line 12b is less than Go to Part 3.	or equal to line 13. On th	e top of page 1, check	box 1, There is no	presumption of ab	ouse.		
14b.	Line 12b is more tha Go to Part 3 and fill of	n line 13. On the top of pout Form 122A-2.	age 1, check box 2, Th	ne presumption of a	abuse is determined	d by Form 122A-2		
Part 3:	Sign Below							
By si	gning here, I declare und	der penalty of perjury that	the information on this	statement and in a	ny attachments is t	true and correct.		
_	/s/ Diane Turner	Usne Jun	w	Signature of D	Pebtor 2			
С	Date 5/29/2018 MM/DD/YYYY			Date 5/29/20 MM/DD	018			
		NOT fill out or file Form 1 out Form 122A-2 and file						

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Tumer, Diane  Debtor(s)	Case No	
		Chapter. Chapter7	
	VERIFICA	TION OF CREDITOR MATRIX	
Th knowledge		at the attached list of creditors is true and correct to the	best of their
Date:	5/29/2018	/s/ Turner, Diane Liane Ju Turner, Diane Signature of Debtor	unev

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ebtor	Diane		Turner	Case number (if
	First Name	Middle Name	Last Name	known)
rt 2:	List Your Unexpir	ed Personal Property Leas	es	
forma	tion below. Do not lis	property lease that you listed in st real estate leases. Unexpired al property lease if the trustee	leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	scribe your unexpired	l personal property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	scription of leased perty:			_
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			_
rt 3	Sign Below	The state of the s	THE PROPERTY OF THE PROPERTY O	
Unde	er penalty of perjury,	I declare that I have indicated o an unexpired lease.	my intention about any	property of my estate that secures a debt and any personal
5 8	/s/ Diane Turner	Diane Junes	*	
S	ignature of Debtor 1		Siç	nature of Debtor 2
D	ate 5/29/2018 MM/DD/YYYY		Da	te MM/DD/YYYY

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Debto	r1 Diane	Turner	Case number (if known)
	First Name Middle Name	Last Name	
28. \ (	Within 2 years before you filed for bankruptcy, die creditors, or other parties.  No Yes. Fill in the details below.	d you give a financial staten	nent to anyone about your business? Include all financial institutions,
		Date issued	
	Name	MM/DD/YYYY	_
	Number Street		
	City State Zip Code		
Part 1	2: Sign Below		
tru	ue and correct. I understand that making a false bankruptcy case can result in fines up to \$250,00	statement, concealing prop 00, or imprisonment for up t	ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Diane Tumer Wiane	Turner)	×
	Signature of Debtor 1		Signature of Debtor 2
	Date 5/29/2018		Date
Die	d you attach additional pages to Your Statement	of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
Z	No Yes		
L Di		allamanta balance cu	
_	d you pay or agree to pay someone who is not an ¶ No	accorney to neip you fill out	t bankruptcy forms?
	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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		Do	cument Pa	ge 67 of 68	
Fill in this inform	mation to identify your o	case:	<b>美国工程</b>	70.00	
Debtor 1	Diane		Turner		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					Check if this is an
Official I	Form 106De	ec e			amended filing
Declarati	on About an	— Individual Debt	tor's Schedu	iles	12/15
If two married p	people are filing togeth	ner, both are equally respo	nsible for supplying c	orrect information.	
					, concealing property, or obtaining
money or prope	erty by fraud in connection 1341, 1519, and 3571.	tion with a bankruptcy cas	se can result in fines	up to \$250,000, or imprisonm	nent for up to 20 years, or both. 18
0.0.0. 33 102,	1041, 1013, and 0071.				
Part 1: Sign	Below				
Did you pa	ay or agree to pay som	eone who is NOT an attorn	ey to help you fill out	bankruptcy forms?	
<b>Ⅳ</b> No					
Yes. N	lame of person		Attach Bankru	ptcy Petition Preparer's Notice,	Declaration, and
<b>-</b>			Signature (Off	icial Form 119).	
	alty of perjury, I decla are true and correct.	re that I have read the sun	nmary and schedules	filed with this declaration ar	ıd
✗ /s/ Diane	Turner Diana	Juner	*		

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 5/29/2018

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First Name		rner Case n	number (if known)	
	estions for Reporting Purposes	st Name		
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>			
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<ul> <li>No. I am not filing under Chapter 7. Go to line 18.</li> <li>✓ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?</li> <li>✓ No.</li> <li>Tes.</li> </ul>			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-5 50,001-7 More tha	
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50	million	0,001-\$1 billion 000,001-\$10 billion ,000,001-\$50 billion an \$50 billion
20. How much do you estimate your liabilities to be?		\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million	0,001-\$1 billion 000,001-\$10 billion ,000,001-\$50 billion an \$50 billion
Part 7: Sign Below	I have aversined this metition as	d I ala alawa dan a a a ali		was delegated to the second
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).			
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
	/s/ Diane Turner / Lax Signature of Debtor 1	ne Turner *	Signature of Debtor 2	
	Executed on 5/29/2018 MM / DD /	/ / / / / / / / / / / / / / / / / / / /	Executed on	<del>0/YYY</del>